PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL EE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further condicated unless corrected maintenance fee notificated to the control of the cont	form should be used to correspondence including the below or directed oth ions.	or trans g the P erwise	mitting the ISSU atent, advance ordin Block I, by (a	E FEE and PUBLIC ders and notification) specifying a new c					ould be completed where correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
23364 7590 07/09/2009 BACON & THOMAS, PLLC 625 SLATERS LANE FOURTH FLOOR ALEXANDRIA, VA 22314-1176						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
ATTN: GEORGE A. LOUD						(Depositor's name)				
ATTN. GEORGE A. BOOD						(Signature)				
					<u> </u>				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVE				ATTOR	NEY DOCKET NO.	CONFIRMATION NO.	
10/565,775				Kazuo Sato			SATO3028/GAL/PMB 2385			
OF INVENTION:	2-DIMENSIONAL CO		RMATION MET	HOD AND FORMA		DEVICE PREV. PAID ISSUE	o cce I	TOTAL FEE(S) DUE	DATE DUE	
	NO NO	150		\$300	306	\$0	ores		DATE DUE	
nonprovisional			\$1510			\$U		\$1810	10/09/2009	
EXAMINER			ART UNIT CLASS-		5					
VO, TUYEN KIM			2887 235-494000							
1. Change of corresponde CFR 1.363). Change of corresponders form PTO/SE "Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.	Соттевропаетсе	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
ARAI CORPORATION JAPAN										
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🔘 Government										
4a. The following fee(s) are submitted: 4b. Payment of Fee(s); (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit overpayment, to Deposit Account Number (enclose an extra copy of the									iciency, or credit any	
* *	s SMALL ENTITY state	is. See 3	37 CFR 1.27.					TTY status, See 37 CF		
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee of pequecords of the United Sta	uired) w tes Pate	ill not be accepted in and Trademark	i from anyone other t Office.	han th	e applicant; a regi	stered a	ttorney or agent; or the	e assignee or other party in	
Authorized Signature Date August 19, 2009										
Typed or printed name	George A. Lo	oud				Registration N	lo. <u>25</u>	,814	ta ta a caracteristic de la caracteristic de l	
This collection of inform an application. Confident submitting the completed this form and/or suggesting 1450, Alexandria, Valexandria, Visionia, 273.	i application form to the ons for reducing this but irginia 22313-1450. DC	FR 1.31 U.S.C. USPTO rden, sh NOT S	11. The information 122 and 37 CFR O. Time will vary ould be sent to the SEND FEES OR C	n is required to obtain 1.14. This collection depending upon the Chief Information COMPLETED FORM	n or re is esti indivi Officer IS TO	tain a benefit by the mated to take 12 r dual case. Any co to U.S. Patent and THIS ADDRESS	he publi ninutes mments Tradem S. SEND	c which is to file (and to complete, including on the amount of tin ark Office, U.S. Depa TO: Commissioner f	by the USPTO to process) g gathering, preparing, and it you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.